

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>4-8-02</u>		2 Serial/Patent # <u>10-D/O 282</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
<u>2</u>	Petition	<u>3</u>	<u>2-15-02</u>	\$ <u>135</u>							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$							
		8 TO BE REFUNDED BY:									
		Treasury Check									
		Credit Deposit A/C #:									
		9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">1</td> <td style="width: 20px;">1</td> <td style="width: 20px;">--</td> <td style="width: 20px;">1</td> <td style="width: 20px;">4</td> <td style="width: 20px;">1</td> <td style="width: 20px;">0</td> </tr> </table>			1	1	--	1	4	1	0
1	1	--	1	4	1	0					
10 REASON:											
	Overpayment										
	Duplicate Payment										
<u>X</u>	No Fee Due (Explanation):										
<u>Office error</u>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>ABROWN</u>		TITLE: <u>Att</u>									
SIGNATURE: <u>ABrown</u>		PHONE: <u>305 0310</u>									
OFFICE: <u>DP</u>											

THIS SPACE RESERVED FOR FINANCE USE ONLY:											
APPROVED: <u>Alma Kelly</u>		DATE: <u>4-15-02</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: